PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

HNO-137-A

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR SMALL ENTITY		
TOTAL CLAIMS			12				RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/2 minus 20=		* -		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*		X42=		OR	X84=	84
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column			olumn 2	TOTAL		OR	TOTAL	834
	C	LAIMS AS A	MENDED - PART II						OTHER THAN SMALL ENTITY		
(Column 1)				(Column 2)		(Column 3)	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	=	X42=		OR	X84=	
_	FIRST PRESE	INTATION OF M	OLITPLE DE	PENDEN	CLAIM		+140=		OR	+280≃	
							TOTAL		OR	TOTAL ADDIT. FEE	×
(Column 1) (Column 2) (Column 3)										ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER		HIGH NUM PREVI	HEST IBER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	*	Minus	**	FOR	=	X\$ 9=	FEE	OR	X\$18=	FEE
MEN	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1			
		+140=	i i	OR	+280=						
		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE						
	, Constitu	(Column 1)			mn 2)	(Column 3)					
AMENDMENT C		ÇLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIR	=	X42=		OR	X84=	
_	LINO! PHESE	ENTATION OF M	OLIPLE DI	EPENDEN	1 CLANV		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE											
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Fotal or Independent) is the highest number found in the appropriate box in column 1.											